

RECEIVED
FAIR POLITICAL PRACTICES COMMISSION
COVER PAGE

FEB 26 2010

Please type or print in ink.

CG

2010 MAR -1 PM 3:12 *Public Document*

NAME (LAST) <u>DENHAM</u>	(FIRST) <u>Jeff</u>	(MIDDLE) <u>JOHN</u>	DAYTIME TELEPHONE NUMBER [REDACTED]
MAILING ADDRESS (Business & Home) [REDACTED]	STREET [REDACTED]	CITY [REDACTED]	STATE [REDACTED]
ZIP CODE [REDACTED]		OPTIONAL: E-MAIL ADDRESS [REDACTED]	

1. Office, Agency, or Court

Name of Office, Agency, or Court:

California Legislature

Division, Board, District, if applicable:

SENATE DIST 12

Your Position:

STATE SENATOR

► If filing for multiple positions, list additional agency(ies)/ position(s): (Attach a separate sheet if necessary.)

Agency: _____

Position: _____

2. Jurisdiction of Office (Check at least one box)

☒ State

☐ County of _____

☐ City of _____

☐ Multi-County _____

☐ Other _____

3. Type of Statement (Check at least one box)

☐ Assuming Office/Initial

Date: _____

☒ Annual: The period covered is January 1, 2009, through December 31, 2009.

-or-

☐ The period covered is _____, through December 31, 2009.

☐ Leaving Office Date Left: _____ (Check one)

☐ The period covered is January 1, 2009, through the date of leaving office.

-or-

☐ The period covered is _____, through the date of leaving office.

☐ Candidate Election Year: _____

4. Schedule Summary

► Total number of pages including this cover page: 8

► Check applicable schedules or "No reportable interests."

I have disclosed interests on one or more of the attached schedules:

Schedule A-1 ☒ Yes - schedule attached
Investments (Less than 10% Ownership)

Schedule A-2 ☒ Yes - schedule attached
Investments (10% or Greater Ownership)

Schedule B ☒ Yes - schedule attached
Real Property

Schedule C ☒ Yes - schedule attached
Income, Loans, & Business Positions (Income Other than Gifts and Travel Payments)

Schedule D ☒ Yes - schedule attached
Income - Gifts

Schedule E ☐ Yes - schedule attached
Income - Gifts - Travel Payments

-or-

☐ No reportable interests on any schedule

5. Verification

I have used all reasonable diligence in preparing this statement. I have reviewed this statement and to the best of my knowledge the information contained herein and in any attached schedules is true and complete.

I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Date Signed

2-18-10

Signature

SCHEDULE A-1

Investments

Stocks, Bonds, and Other Interests

(Ownership Interest is Less Than 10%)

Do not attach brokerage or financial statements.

CALIFORNIA FORM 700

FAIR POLITICAL PRACTICES COMMISSION

Name

DENHAM

NAME OF BUSINESS ENTITY
JC Williams Corp.

GENERAL DESCRIPTION OF BUSINESS ACTIVITY
Real Estate

FAIR MARKET VALUE
☐ \$2,000 - \$10,000
☒ \$100,001 - \$1,000,000
☐ \$10,001 - \$100,000
☐ Over \$1,000,000

NATURE OF INVESTMENT
☐ Stock
☒ Other Real Estate
 (Describe)
☐ Partnership ☐ Income of \$0 - \$500
☐ Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:
 / / 09 / / 09
 ACQUIRED DISPOSED

NAME OF BUSINESS ENTITY

GENERAL DESCRIPTION OF BUSINESS ACTIVITY

FAIR MARKET VALUE
☐ \$2,000 - \$10,000
☐ \$100,001 - \$1,000,000
☐ \$10,001 - \$100,000
☐ Over \$1,000,000

NATURE OF INVESTMENT
☐ Stock
☐ Other
 (Describe)
☐ Partnership ☐ Income of \$0 - \$500
☐ Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:
 / / 09 / / 09
 ACQUIRED DISPOSED

NAME OF BUSINESS ENTITY

GENERAL DESCRIPTION OF BUSINESS ACTIVITY

FAIR MARKET VALUE
☐ \$2,000 - \$10,000
☐ \$100,001 - \$1,000,000
☐ \$10,001 - \$100,000
☐ Over \$1,000,000

NATURE OF INVESTMENT
☐ Stock
☐ Other
 (Describe)
☐ Partnership ☐ Income of \$0 - \$500
☐ Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:
 / / 09 / / 09
 ACQUIRED DISPOSED

NAME OF BUSINESS ENTITY

GENERAL DESCRIPTION OF BUSINESS ACTIVITY

FAIR MARKET VALUE
☐ \$2,000 - \$10,000
☐ \$100,001 - \$1,000,000
☐ \$10,001 - \$100,000
☐ Over \$1,000,000

NATURE OF INVESTMENT
☐ Stock
☐ Other
 (Describe)
☐ Partnership ☐ Income of \$0 - \$500
☐ Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:
 / / 09 / / 09
 ACQUIRED DISPOSED

NAME OF BUSINESS ENTITY

GENERAL DESCRIPTION OF BUSINESS ACTIVITY

FAIR MARKET VALUE
☐ \$2,000 - \$10,000
☐ \$100,001 - \$1,000,000
☐ \$10,001 - \$100,000
☐ Over \$1,000,000

NATURE OF INVESTMENT
☐ Stock
☐ Other
 (Describe)
☐ Partnership ☐ Income of \$0 - \$500
☐ Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:
 / / 09 / / 09
 ACQUIRED DISPOSED

NAME OF BUSINESS ENTITY

GENERAL DESCRIPTION OF BUSINESS ACTIVITY

FAIR MARKET VALUE
☐ \$2,000 - \$10,000
☐ \$100,001 - \$1,000,000
☐ \$10,001 - \$100,000
☐ Over \$1,000,000

NATURE OF INVESTMENT
☐ Stock
☐ Other
 (Describe)
☐ Partnership ☐ Income of \$0 - \$500
☐ Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:
 / / 09 / / 09
 ACQUIRED DISPOSED

Comments:

SCHEDULE A-2
Investments, Income, and Assets
of Business Entities/Trusts
(Ownership Interest is 10% or Greater)

CALIFORNIA FORM 700
FAIR POLITICAL PRACTICES COMMISSION

Name
DENHAM

1. BUSINESS ENTITY OR TRUST

Name DENHAM PLASTICS

Address (Business Address Acceptable) 1037 ABBOTT ST. GLENDALE CA 93901

Check one
☐ Trust, go to 2 ☒ Business Entity, complete the box, then go to 2

GENERAL DESCRIPTION OF BUSINESS ACTIVITY
PLASTIC MFG

FAIR MARKET VALUE IF APPLICABLE, LIST DATE:
☐ \$2,000 - \$10,000
☐ \$10,001 - \$100,000
☐ \$100,001 - \$1,000,000
☒ Over \$1,000,000

NATURE OF INVESTMENT
☐ Sole Proprietorship ☒ Partnership ☐ Other

YOUR BUSINESS POSITION MEMBER

2. IDENTIFY THE GROSS INCOME RECEIVED (INCLUDE YOUR PRO RATA SHARE OF THE GROSS INCOME TO THE ENTITY/TRUST)

☐ \$0 - \$499 ☐ \$10,001 - \$100,000
☐ \$500 - \$1,000 ☒ OVER \$100,000
☐ \$1,001 - \$10,000

3. LIST THE NAME OF EACH REPORTABLE SINGLE SOURCE OF INCOME OF \$10,000 OR MORE (Attach a separate sheet if necessary.)

SEE ATTACHED

4. INVESTMENTS AND INTERESTS IN REAL PROPERTY HELD BY THE BUSINESS ENTITY OR TRUST

Check one box:
☐ INVESTMENT ☒ REAL PROPERTY

Name of Business Entity or Street Address or Assessor's Parcel Number of Real Property
DENHAM PLASTICS
PLASTICS MFG

Description of Business Activity or City or Other Precise Location of Real Property

FAIR MARKET VALUE IF APPLICABLE, LIST DATE:
☐ \$2,000 - \$10,000
☒ \$10,001 - \$100,000
☐ \$100,001 - \$1,000,000
☐ Over \$1,000,000

NATURE OF INTEREST
☐ Property Ownership/Deed of Trust ☐ Stock ☒ Partnership
☒ Leasehold 1 Yrs. remaining ☐ Other

☐ Check box if additional schedules reporting investments or real property are attached

1. BUSINESS ENTITY OR TRUST

Name

Address (Business Address Acceptable)

Check one
☐ Trust, go to 2 ☐ Business Entity, complete the box, then go to 2

GENERAL DESCRIPTION OF BUSINESS ACTIVITY

FAIR MARKET VALUE IF APPLICABLE, LIST DATE:
☐ \$2,000 - \$10,000
☐ \$10,001 - \$100,000
☐ \$100,001 - \$1,000,000
☐ Over \$1,000,000

NATURE OF INVESTMENT
☐ Sole Proprietorship ☐ Partnership ☐ Other

YOUR BUSINESS POSITION

2. IDENTIFY THE GROSS INCOME RECEIVED (INCLUDE YOUR PRO RATA SHARE OF THE GROSS INCOME TO THE ENTITY/TRUST)

☐ \$0 - \$499 ☐ \$10,001 - \$100,000
☐ \$500 - \$1,000 ☐ OVER \$100,000
☐ \$1,001 - \$10,000

3. LIST THE NAME OF EACH REPORTABLE SINGLE SOURCE OF INCOME OF \$10,000 OR MORE (Attach a separate sheet if necessary.)

4. INVESTMENTS AND INTERESTS IN REAL PROPERTY HELD BY THE BUSINESS ENTITY OR TRUST

Check one box:
☐ INVESTMENT ☐ REAL PROPERTY

Name of Business Entity or Street Address or Assessor's Parcel Number of Real Property

Description of Business Activity or City or Other Precise Location of Real Property

FAIR MARKET VALUE IF APPLICABLE, LIST DATE:
☐ \$2,000 - \$10,000
☐ \$10,001 - \$100,000
☐ \$100,001 - \$1,000,000
☐ Over \$1,000,000

NATURE OF INTEREST
☐ Property Ownership/Deed of Trust ☐ Stock ☐ Partnership
☐ Leasehold Yrs. remaining ☐ Other

☐ Check box if additional schedules reporting investments or real property are attached

Comments:

B&B Plastic Recyclers Inc
Dobler & Sons
Dole Fresh Vegetables, Inc.
Field Fresh Farms
Fresh Express
Go Green Industries
Gold Coast Packing, Inc.
Martines Farming
ORBIS Corporation
Taylor Farms
Taylor Fresh
True Leaf Farms
Watsonville Produce

Name _____

DENHAM

5307 BildHorn

CITY

Truckee CA

☐ \$2,000 - \$10,000
☐ \$10,001 - \$100,000
☒ \$100,001 - \$1,000,000
☐ Over \$1,000,000

 / /09 / /09
 ACQUIRED DISPOSED

☒ Ownership/Deed of Trust ☐ Easement

☐ Leasehold _____ ☐ _____
Yrs. remaining Other

☐ \$0 - \$499 ☐ \$500 - \$1,000 ☒ \$1,001 - \$10,000
☐ \$10,001 - \$100,000 ☐ OVER \$100,000

CITY

☐ \$2,000 - \$10,000

☐ \$10,001 - \$100,000

☐ \$100,001 - \$1,000,000

☐ Over \$1,000,000

 / /09 / /09
 ACQUIRED DISPOSED

☐ Ownership/Deed of Trust ☐ Easement

☐ Leasehold _____ ☐ _____
Yrs. remaining Other

☐ \$0 - \$499 ☐ \$500 - \$1,000 ☐ \$1,001 - \$10,000
☐ \$10,001 - \$100,000 ☐ OVER \$100,000

SCHEDULE C
Income, Loans, & Business
Positions
(Other than Gifts and Travel Payments)

CALIFORNIA FORM 700 FAIR POLITICAL PRACTICES COMMISSION
Name <u>DONHAM</u>

► **1. INCOME RECEIVED**

NAME OF SOURCE OF INCOME

JC Williams Corp
ADDRESS (Business Address Acceptable)

2350 W. Monte Vista Turlock CA
BUSINESS ACTIVITY, IF ANY, OF SOURCE

Real Estate
YOUR BUSINESS POSITION

Investor

GROSS INCOME RECEIVED

- ☐ \$500 - \$1,000 ☐ \$1,001 - \$10,000
☒ \$10,001 - \$100,000 ☐ OVER \$100,000

CONSIDERATION FOR WHICH INCOME WAS RECEIVED

☐ Salary ☐ Spouse's or registered domestic partner's income

☒ Loan repayment ☐ Partnership

☐ Sale of _____
(Property, car, boat, etc.)

☐ Commission or ☐ Rental Income, list each source of \$10,000 or more

☐ Other _____
(Describe)

► **1. INCOME RECEIVED**

NAME OF SOURCE OF INCOME

Earthbound Farm
ADDRESS (Business Address Acceptable)

1721 San Juan Hwy San Juan Bautista CA
BUSINESS ACTIVITY, IF ANY, OF SOURCE

Agriculture Products 95045
YOUR BUSINESS POSITION

Spouse of Employee

GROSS INCOME RECEIVED

- ☐ \$500 - \$1,000 ☐ \$1,001 - \$10,000
☐ \$10,001 - \$100,000 ☒ OVER \$100,000

CONSIDERATION FOR WHICH INCOME WAS RECEIVED

☐ Salary ☒ Spouse's or registered domestic partner's income

☐ Loan repayment ☐ Partnership

☐ Sale of _____
(Property, car, boat, etc.)

☐ Commission or ☐ Rental Income, list each source of \$10,000 or more

☐ Other _____
(Describe)

► **2. LOANS RECEIVED OR OUTSTANDING DURING THE REPORTING PERIOD**

* You are not required to report loans from commercial lending institutions, or any indebtedness created as part of a retail installment or credit card transaction, made in the lender's regular course of business on terms available to members of the public without regard to your official status. Personal loans and loans received not in a lender's regular course of business must be disclosed as follows:

NAME OF LENDER*

ADDRESS (Business Address Acceptable)

BUSINESS ACTIVITY, IF ANY, OF LENDER

HIGHEST BALANCE DURING REPORTING PERIOD

- ☐ \$500 - \$1,000
☐ \$1,001 - \$10,000
☐ \$10,001 - \$100,000
☐ OVER \$100,000

INTEREST RATE

_____% ☐ None

TERM (Months/Years)

SECURITY FOR LOAN

☐ None ☐ Personal residence

☐ Real Property _____
Street address

City

☐ Guarantor _____

☐ Other _____
(Describe)

Comments: _____

SCHEDULE D Income - Gifts

CALIFORNIA FORM 700 FAIR POLITICAL PRACTICES COMMISSION Name <u>DEWHAM</u>
--

► NAME OF SOURCE
Council for Legislative Excellence
 ADDRESS (Business Address Acceptable)
2150 River Plaza Dr. Suite 150 Sacramento
 BUSINESS ACTIVITY, IF ANY, OF SOURCE
Legislative Summit

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
12/4/09	\$ 150 ⁵⁰	Briefcase
12/4/09	\$ 46 ⁰⁰	Fleece
12/4/09	\$ 59 ³³	Cufflinks

► NAME OF SOURCE
Governor's Cup Foundation
 ADDRESS (Business Address Acceptable)
755 Riverfront Dr. West Sacramento CA
 BUSINESS ACTIVITY, IF ANY, OF SOURCE
Legislative Round Table

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
7/23/09	\$ 420	Gift Card
/ /	\$	
/ /	\$	

► NAME OF SOURCE
 ADDRESS (Business Address Acceptable)
 BUSINESS ACTIVITY, IF ANY, OF SOURCE

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
/ /	\$	
/ /	\$	
/ /	\$	

► NAME OF SOURCE
Rod Wright
 ADDRESS (Business Address Acceptable)
PO Box 8542 Los Angeles CA
 BUSINESS ACTIVITY, IF ANY, OF SOURCE
LAO Committee

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
6/15/09	\$ 62	Wine Cooler
/ /	\$	
/ /	\$	

► NAME OF SOURCE
Republican State Leadership Comm.
 ADDRESS (Business Address Acceptable)
1800 diagonal rd. Alexandria VA 22314
 BUSINESS ACTIVITY, IF ANY, OF SOURCE
Capital Club Retreat

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
7/12/09	\$ 396 ⁰³	Accommodations
/ /	\$	
/ /	\$	

► NAME OF SOURCE
 ADDRESS (Business Address Acceptable)
 BUSINESS ACTIVITY, IF ANY, OF SOURCE

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
/ /	\$	
/ /	\$	
/ /	\$	

Comments: _____

SCHEDULE E
Income – Gifts
Travel Payments, Advances,
and Reimbursements

CALIFORNIA FORM 700

FAIR POLITICAL PRACTICES COMMISSION

Name _____

- Reminder – you must mark the gift or income box.
- You are not required to report income from government agencies.

▶ NAME OF SOURCE
Chiquita Fresh Express
ADDRESS (Business Address Acceptable)
950 E. Blanco Road
CITY AND STATE
Salinas, CA 93901
BUSINESS ACTIVITY, IF ANY, OF SOURCE
Produce
DATE(S): 9/14/09 - 9/16/09 AMT: \$ 407.54
(If applicable)
TYPE OF PAYMENT: (must check one) ☒ Gift ☐ Income
DESCRIPTION: Travel to & from
conference

▶ NAME OF SOURCE

ADDRESS (Business Address Acceptable)

CITY AND STATE

BUSINESS ACTIVITY, IF ANY, OF SOURCE

DATE(S): ____/____/____ - ____/____/____ AMT: \$ ____
(If applicable)
TYPE OF PAYMENT: (must check one) ☐ Gift ☐ Income
DESCRIPTION: _____

▶ NAME OF SOURCE

ADDRESS (Business Address Acceptable)

CITY AND STATE

BUSINESS ACTIVITY, IF ANY, OF SOURCE

DATE(S): ____/____/____ - ____/____/____ AMT: \$ ____
(If applicable)
TYPE OF PAYMENT: (must check one) ☐ Gift ☐ Income
DESCRIPTION: _____

▶ NAME OF SOURCE

ADDRESS (Business Address Acceptable)

CITY AND STATE

BUSINESS ACTIVITY, IF ANY, OF SOURCE

DATE(S): ____/____/____ - ____/____/____ AMT: \$ ____
(If applicable)
TYPE OF PAYMENT: (must check one) ☐ Gift ☐ Income
DESCRIPTION: _____

Comments: _____